

STATEMENT OF ORGANIZATION		OFFICE USE ONLY															
1. Name and Address of Committee MICHAEL S. YENNI CAMPAIGN P.O. Box 640938 Kenner, LA 70064 Check If: New Committee _____	2. Date of this Statement <div style="text-align: center;">1/27/2017</div>	Report Number: 62038 Date Filed: 1/27/2017 															
	3. Estimated Membership <div style="text-align: center;">5</div>																
	4. Amended Statement? <div style="text-align: center;"> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No </div>																
5. All Committee Officers and Directors (including Chairperson, Treasurer, if any, and any other committee officers and directors) <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 33%;"><u>a. Name</u></th> <th style="text-align: left; width: 33%;"><u>b. Position</u></th> <th style="text-align: left; width: 33%;"><u>c. Address</u></th> </tr> </thead> <tbody> <tr> <td>TO BE DETERMINED</td> <td>Chairperson</td> <td>To Be Determined</td> </tr> <tr> <td></td> <td></td> <td>To Be Determined, LA 00000</td> </tr> <tr> <td>RYAN KRUSE</td> <td>Treasurer</td> <td>4812 Wade Dr.</td> </tr> <tr> <td></td> <td></td> <td>Metairie, LA 70003</td> </tr> </tbody> </table>			<u>a. Name</u>	<u>b. Position</u>	<u>c. Address</u>	TO BE DETERMINED	Chairperson	To Be Determined			To Be Determined, LA 00000	RYAN KRUSE	Treasurer	4812 Wade Dr.			Metairie, LA 70003
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RYAN KRUSE	Treasurer	4812 Wade Dr.															
		Metairie, LA 70003															
6. Affiliated Organizations (Any organization, other than a political committee, which directly or indirectly established, administers, or financially supports this committee.) <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 33%;"><u>a. Name</u></th> <th style="text-align: left; width: 33%;"><u>b. Address</u></th> <th style="text-align: left; width: 33%;"><u>c. Relationship to Committee</u></th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> </tbody> </table>			<u>a. Name</u>	<u>b. Address</u>	<u>c. Relationship to Committee</u>												
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7. All Depositories for Committee Funds (committee funds must be deposited in one or more banks or savings and loan institutions or money market mutual funds.) <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 33%;"><u>a. Name</u></th> <th style="text-align: left; width: 33%;"><u>b. Address</u></th> </tr> </thead> <tbody> <tr> <td>On attached sheet</td> <td> </td> </tr> </tbody> </table>			<u>a. Name</u>	<u>b. Address</u>	On attached sheet												
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8. IF THIS COMMITTEE SUPPORTS A SINGLE CANDIDATE: a. Check one: <input checked="" type="checkbox"/> Principal Campaign Committee <input type="checkbox"/> Subsidiary Committee																	
b. Name of Candidate MICHAEL S. YENNI	c. Office Sought by the Candidate Parish President																
9. a. Name of Person Preparing Report CYNTHIA AUSTIN b. Daytime Telephone 504-450-8722																	
10. WE HEREBY CERTIFY that the information contained in this STATEMENT OF ORGANIZATION is true and correct to the best of our knowledge , information and belief. This 27th day of January , 2017 . <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <u>To Be Determined</u> Signature of Committee/Chairperson <u>Ryan Kruse</u> Signature of Committee Treasurer, if any </div> <div style="width: 45%; text-align: right;"> _____ Daytime Telephone <u>504-813-7389</u> Daytime Telephone </div> </div>																	

7. All Depositories for Committee Funds (committee funds must be deposited in one or more banks or savings and loan institutions or money market mutual funds.)

a. Name

REGIONS BANK

b. Address

810 W. Esplanade Ave.
Kenner, LA 70065